

Southeast Asia Intercountry Consultative Meeting on Prevention and Control of New, Emerging, and Reemerging Infectious Diseases

An intercountry meeting to identify strategies and approaches for tackling the problems of new, emerging, and reemerging infectious diseases in the Southeast Asia region was held in New Delhi, India, August 21 to 25, 1995.

Nine countries (Bangladesh, Bhutan, India, Indonesia, Maldives, Myanmar, Nepal, Sri Lanka, and Thailand) participated. Experts from these countries, England, and the United States, as well as representatives from USAID, DANIDA, UNICEF, the World Bank, and the World Health Organization (WHO) also attended.

Meeting participants expressed serious concern at the global and regional spread of new, emerging, and reemerging infectious diseases, especially in the Southeast Asia region. Reports from various countries emphasized that these diseases not only have worldwide health implications but also can disrupt commerce and industry and set back important progress achieved in public health during recent years. The spread of these diseases also has major social and political implications.

Participants at the meeting underlined the importance of surveillance, prompt epidemiologic investigation, and the build-up of adequate laboratory capacities. The need for maintaining ecologic and environmental integrity in various developmental activities was also emphasized. Member countries were called upon to immediately review and strengthen capacities in epi-

demio surveillance and response and to formulate country-specific strategies and action plans to anticipate, quickly recognize, and rapidly respond to the threat of emerging infections.

To ensure program sustainability, participants stressed that strategies to combat emerging diseases should be an integral part of existing national infrastructures, particularly infectious disease control programs, and should build on the capacities that already exist. Four broad areas for tackling the challenge of emerging diseases were identified: strengthening communicable disease surveillance and response, strengthening the existing infrastructure, capacity building for prevention and control, and applied research.

A total of 12 actions were recommended. One, for example, was that each country create a rapid response team to react to epidemic situations. A second recommendation was that countries develop linkages between their national reference laboratories and WHO collaborating centers. This would be to strengthen diagnostic capacities, facilitate quality assurance, and promote national self-reliance in laboratory diagnosis.

Eight recommended actions for WHO to undertake were also enumerated. These included assessing and monitoring microbial susceptibility to antibiotics, and vector susceptibility to insecticides.

For the complete list of conclusions and recommendations of this meeting, contact WHO's Regional Office for South-East Asia.

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